

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DR</i>	<i>32</i>	<i>5/15</i>
FORMALITY REVIEW	<i>HL</i>	<i>1074</i>	<i>06/13/01</i>
RESPONSE FORMALITY REVIEW	<i>MI</i>	<i>825</i>	<i>2130/01</i>

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Cancelled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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6/13/01
R83P
05/28/01
07-30-01